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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/542,875
	Filing Date	July 20, 2005
	First Named Inventor	Jonathan Rhodes
	Art Unit	Unknown
	Examiner Name	Unknown
Total Number of Pages in This Submission	Attorney Docket Number	69155-2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Davis Wright Tremaine LLP		
Signature			
Printed name	Seth D. Levy		
Date	October 11, 2005	Reg. No.	44,869

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Jonathan Rhodes                      Examiner: Unknown  
Serial No.: 10/542,875                      Group Art Unit: Unknown  
Filed: July 20, 2005                      Docket: 69155-2  
Title: TREATMENT OF INFLAMMATORY BOWEL DISEASE

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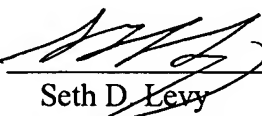
LETTER

Dear Sir:

As assignment of this application has been recorded in the receiving office for the international PCT application upon which the present national phase application is based (App. No. PCT/GB2004/000521, filed February 10, 2004). The original assignee was UNIVERSITY OF LIVERPOOL. The new assignee is PROVEXIS (IBD) LIMITED. A copy of the form PCT/IB/306 evidencing the recording of this change is enclosed along with a Supplemental Application Data Sheet.

Respectfully submitted,  
Jonathan Rhodes  
DAVIS WRIGHT TREMAINE LLP

Date: October 11, 2005

By:   
Seth D. Levy  
Registration No. 44,869  
Attorney for Applicant

Enclosures: Copy of Notification of the Recording of a Change (form PCT/IB/306)  
Supplemental Application Data Sheet

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